### **FEC FORM 2**

#### STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Ted Strickland			SECRETA	RY OF THE	SENAT		
(b) Address (number and street) 5661 Chowning Way	Check if add	ress changed	2	Candidate's	FEC Ide		Number
(c) City, State, and ZIP Code Columbus, OH 43213		0	3	. Is This tatement	New (N)	OR	Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought Senate		6. State & OH	District of Ca	andidate		
DESIG	NATION OF PRI	NCIPAL CA	MPAIC	N COM	<b>AITTEE</b>		
7. I hereby designate the following na	amed political committee	as my Principal	Campaig	n Committee	for the	201 (year of etc	election(s).
NOTE: This designation should be fi	ed with the appropriate o	office listed in th	e instruction	ons.		(year or en	cuan
(a) Name of Committee (in full)							
Strickland for Senate	è						
(b) Address (number and street)							
PO Box 2196							
(c) City, State, and ZIP Code							
Columbus, OH 43216							
behalf of my candidacy.  NOTE: This designation should be file	ed with the principal cam	paign committee	€,				
(a) Name of Committee (in full)							
Strickland Ohio Victo	ery Fund 2016						
(b) Address (number and street)							
611 Pennsylvania Ave	Ste 143						
(c) City, State, and ZIP Code			,		•		
Washington, DC 20003							
certify that I have examine	d this Statement and to th	ne best of my kr	owledge	and belief it i	s true, co	rrect and	complete.
Signature of Candidate  Sed Strue	kland			Date II/	13/6	10 <i>15</i>	-
Note: Submission of false, erroneous, or Inc.	omplete Information may subje	ect the person sign	ng this State	ement to penalt	ies of 2 U.S	.C 437g.	

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#### FORM 2S - STATEMENT OF CANDIDACY (SUPPLEMENTAL PAGE)

FEC FORM 2 (REV. 02/2003)	Page 2 / 2
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive an behalf of my candidacy.	d expend funds on
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	· · · · · ·
Justice 2016	
(b) Address (number and street) 918 Pennsylvania Ave SE	
(c) City, State, and ZIP Code	
Washington, DC 20003	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive an behalf of my candidacy.	d expend funds on
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	

ONW Victory 2016

(b) Address (number and street) 611 Pennsylvania Ave SE Ste 143

(c) City, State, and ZIP Code

Washington, DC 20003

#### **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Bring Back Sense to the Senate 2016

(b) Address (number and street) 120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

# Hand Delivered

DANA K, MACCALLUM SUPERINTENDENT HART SENATE OFFICE BUILDING SUITE 237 WASHIMSTON, OC 70510-71 PHONE (202) 224-0322

2/28/2015

## United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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PAXDate of Receipt	
OTHER	
PREPARER DATE PREPARED	11/20/15



SEN PATCH



**SEN PATCH**